

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
10	✓
11	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
27	
28	✓
29	
31	
32	
33	
34	
35	
36	
37	
38	✓
39	
41	
42	
48	✓
45	
46	
47	
48	
49	
50	

Claim	Date
Final Original	
51	✓
52	
53	
54	
55	
57	
58	✓
59	
61	
62	
63	
64	
65	
66	
67	✓
242	✓
247	✓
248	✓
249	✓
250	✓

Claim	Date
Final Original	
29	✓
252	✓
253	✓
261	✓
262	✓
263	✓
264	✓
265	✓
266	✓
267	✓
268	✓
269	✓
270	✓
271	✓
272	✓
273	✓
274	✓
275	✓
276	✓
277	✓
278	✓
279	✓
280	✓
281	✓
282	✓
283	✓
284	✓
285	✓
286	✓
287	✓
288	✓
289	✓
290	✓
291	✓
292	✓
293	✓
294	✓
295	✓
296	✓
297	✓
298	✓
299	✓
300	✓

If more than 150 claims or 10 actions  
staple additional sheet here

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